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PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No. 2738-18

First Inventor Lester F. Ludwig

Title "MULTI-CHANNEL SIGNAL PROCESSING FOR MULTI-CHANNEL
MUSICAL INSTRUMENTS"

Express Mail Label No. EL 898590399 US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

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1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 192]
(preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 72]
[Total Pages 02]
5. Oath or Declaration [Total Pages 02]
 - a. ☒ Newly executed (original or copy)
 - b. ☐ Copy from a prior application (37 CFR 1.63 (d))
(for a continuation/divisional with Box 19 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATIONS PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 C.F.R. §3.73(b) Statement ☒ Power of Attorney
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122
(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☒ Other: Credit Card Payment Form

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No: 09 / 812,400

Prior application information: Examiner Marlon T. Fletcher

Group / Art Unit: 2837

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

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State

Zip Code

Country

Telephone

Fax

Name (Print/Type)

Jeffrey J. Lotspeich

Registration No. (Attorney/Agent)

45,737

Signature

Jeffrey J. Lotspeich

Date

30 September 2003

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17236 U.S. PTO
09/30/03

<h1 style="text-align: center;">FEE TRANSMITTAL</h1> <h2 style="text-align: center;">for FY 2003</h2> <p style="text-align: center;"><i>Patent fees are subject to annual revision.</i></p>		<i>Complete if Known</i>		
		Application Number		
		Filing Date	30 September 2003	
		First Named Inventor	Lester F. Ludwig	
		Examiner Name		
		Group / Art Unit		
TOTAL AMOUNT OF PAYMENT	(\$)	1239	Attorney Docket No.	2738-018

METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account: Deposit Account Number: 020460 Deposit Account Name: THE MAXHAM FIRM The Commissioner is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.					FEE CALCULATION (continued) 3. ADDITIONAL FEES																																																																																																																																																					
1. BASIC FILING FEE					<table border="1"> <thead> <tr> <th>Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td></td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td></td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td></td></tr> <tr><td>1254</td><td>1,450</td><td>2254</td><td>725</td><td></td></tr> <tr><td>1255</td><td>1,970</td><td>2255</td><td>985</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td></td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td></td></tr> <tr><td>1453</td><td>1,300</td><td>2453</td><td>650</td><td></td></tr> <tr><td>1501</td><td>1,300</td><td>2501</td><td>650</td><td></td></tr> <tr><td>1502</td><td>470</td><td>2502</td><td>235</td><td></td></tr> <tr><td>1503</td><td>630</td><td>2503</td><td>315</td><td></td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td></td></tr> <tr><td>1809</td><td>750</td><td>2809</td><td>375</td><td></td></tr> <tr><td>1810</td><td>750</td><td>2810</td><td>375</td><td></td></tr> <tr><td>1801</td><td>750</td><td>2801</td><td>375</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td></td></tr> </tbody> </table>					Fee Code	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	1051	130	2051	65		1052	50	2052	25		1053	130	1053	130		1812	2,520	1812	2,520		1804	920*	1804	920*		1805	1,840*	1805	1,840*		1251	110	2251	55		1252	410	2252	205		1253	930	2253	465		1254	1,450	2254	725		1255	1,970	2255	985		1401	320	2401	160		1402	320	2402	160		1403	280	2403	140		1451	1,510	1451	1,510		1452	110	2452	55		1453	1,300	2453	650		1501	1,300	2501	650		1502	470	2502	235		1503	630	2503	315		1460	130	1460	130		1807	50	1807	50		1806	180	1806	180		8021	40	8021	40		1809	750	2809	375		1810	750	2810	375		1801	750	2801	375		1802	900	1802	900	
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<i>Complete (if applicable)</i>					
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Name (Print/Type)	Jeffrey J. Lotspeich	Registration No. Attorney/Agent	45,737	Telephone	619-233-9004
Signature	<i>Jeffrey J. Lotspeich</i>	Date	30 September 2003		

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Belinda M. Owens

(NAME)

Belinda M. Owens

(SIGNATURE)